



Application No. 10/718,296

October 13, 2005

Petition to Withdraw Holding of Abandonment

Attention Mr. Hugh B. Thompson

Date mailed: 17/10/2005

Upon receipt of Notice of Abandonment of October 11 2005, due to my failure to respond to Office Communication of March 9, 2005, I wish to advise you that my failure to respond to you communication of March 9, was an unavoidable delay because this letter was never delivered to me.

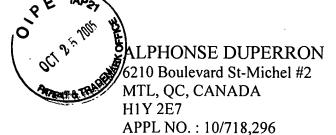
Upon your recommendation that I make a Petition, under 37 CFR 1.137 (a) for unavoidable delay, I wish to complete the application form showing my corrected postal address, telephone number and all other details contained in the DECLARATION FOR UTILITY DESIGN PATENT APPLICATION (37 CFR1.63).

As reference to my good faith and proof of my desire to continue my applications, upon immediate receipt of the october // 2005 Notice of Abandonment, I phoned you immediate applications at length.

With completed application, please find money order for fees of \$55.

Yours sincerely,

Alphonse Duperron



COMMISION FOR PATENTS P.O. BOX 1450 Alexandria, Virginia 22313-1450

Subject: Change of Address

This letter is addressed to the 'commission for patents'. This letter is to warn you about my change of address. My new address since 1/09/2004 is 6210 Boulevard St-Michel #2, MTL QC H2E 2Y9. The old address was (7359 D'iberville MTL QC H2E 2Y9).

Sincerely yours,

ALPHONSE DUPERRON

Date: Mailed 17/10/2005.

PTO/SB/21 (03-03) Approved for use through 04/30/2003 OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE are required to respond to a collection of information unless it displays a valid QMB control number **Application Number** TRANSMITTAL Filing Date **FORM** First Named Inventor Art Unit (to be used for all correspondence after initial filing) Examiner Name Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication Fee Transmittal Form Drawing(s) to Group Appeal Communication to Board icensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to Group Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer **Extension of Time Request** Identify below): Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Remarks **Certified Copy of Priority** Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Individual Signature Date CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date. Typed or printed Signature Date

This collection of information is required by 3 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Date: mailed 17/10/2005. PTO/SB/17 (01-03) Approved for use through 04/30/2003 OMB 0651-0032 e Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE EE TRANSMITTAL Complete if Known **Application Number** for FY 2003 Filing Date First Named Inventor Effective 01/01/2003. Patent fees are subject to annual revision. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit TOTAL AMOUNT OF PAYMENT (\$) Attomey Docket No METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) Check Credit card Money Other 3. ADDITIONAL FEES Order Large Entity | Small Entity Deposit Account: =ee Deposit Fee Description Account Code (\$) Code (5) Fee Paid Number 1051 130 2051 65 Surcharge - late filing fee or oath Deposit 1052 Account 50 2052 Surcharge - late provisional filing fee or Name cover sheet The Commissioner is authorized to: (check all that apply) 1053 130 1053 130 Non-English specification Charge fee(s) indicated below 1812 2,520 1812 2,520 For filing a request for ex parte reexamination Credit any overpayments Charge any additional fee(s) during the pendency of this application 1804 9201 1804 920* Requesting publication of SIR prior to Examiner action Charge fee(s) indicated below, except for the filing fee 1805 1,840 1805 1,840* to the above-identified deposit account. Requesting publication of SIR after Examiner action **FEE CALCULATION** 1251 110 2251 55 Extension for reply within first month 1. BASIC FILING FEE 1252 410 2252 205 Extension for reply within second month arge Entity Small Entity 1253 930 2253 465 Extension for reply within third month Fee Fee Code (\$) Fee Description Fee Paid 1254 1.450 2254 Code (\$) Extension for reply within fourth month 1001 750 2001 375 Utility filing fee 1255 1,970 2255 985 Extension for reply within fifth month 1002 330 2002 165 Design filing fee 1401 320 2401 160 Notice of Appeal 1003 520 2003 260 Plant filing fee 1402 320 2402 160 Filing a brief in support of an appeal 1004 750 2004 375 Reissue filing fee 1403 280 2403 140 Request for oral hearing 1005 160 2005 Provisional filing fee 1451 1,510 1451 1,510 Petition to institute a public use proceeding QSUBTOTAL (1) (\$) 1452 O 110 2452 55 Petition to revive - unavoidable 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 1453 1,300 2453 650 Petition to revive - unintentional 1501 1,300 2501 650 Utility issue fee (or reissue) Fee from Ext<u>ra Claim</u>s below 1502 470 2502 235 Design issue fee **Total Claims** -20** = Х 1503 Independent 630 2503 315 Plant issue fee Multiple Dependent 1460 130 1460 130 Petitions to the Commissioner

1807 50 1807 50 Processing fee under 37 CFR 1.17(q) Large Entity Small Entity 1806 180 Fee Description 1806 180 Submission of Information Disclosure Stmt Fee Fee Code (\$) Code (\$) 40 Recording each patent assignment per 8021 40 8021 1202 18 2202 9 Claims in excess of 20 property (times number of properties) 375 Filing a submission after final rejection (37 CFR 1.129(a)) 1201 1809 750 84 2809 2201 42 Independent claims in excess of 3 1203 280 2203 Multiple dependent claim, if not paid 1810 750 2810 375 For each additional invention to be 1204 Reissue independent claims 84 2204 examined (37 CFR 1.129(b)) over original patent 1801 750 2801 375 Request for Continued Examination (RCE) 1205 18 2205 ** Reissue claims in excess of 20 1802 900 1802 900 Request for expedited examination and over original patent

SUBTOTAL (2)

••or number previously paid, if greater, For Reissues, see above

SUBTOTAL (3) SUBMITTED BY (Complete (if applicable) Name (Print/Type) Registration No. Telephone Signature Date

Other fee (specify)

*Reduced by Basic Filing Fee Paid

of a design application

: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

10718296

Date: mailed 17/10/2005

OCT 2 6 7005 WE

Please type a plus sign (+) inside this box ' ----

PTO/SB/05 (03-01)
Approved for use through 10/31/2002, OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE and the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.

First Inventor Apphows Duponara

Title The INSTANTANEOUS EVACUATION TUBE

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. **APPLICATION ELEMENTS** Assistant Commissioner for Patents ADDRESS TO: **Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or nt an original and a duplicate for fee processing Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) Specification [Total Pages Computer Readable Form (CRF) - Descriptive title of the invention Specification Sequence Listing on: Cross Reference to Related Applications Statement Regarding Fed sponsored R & D CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix paper - Background of the Invention Statements verifying identity of above copies - Brief Summary of the Invention - Brief Description of the Drawings (if filed) ACCOMPANYING APPLICATION PARTS Detailed Description Assignment Papers (cover sheet & document(s)) - Claim(s) - Abstract of the Disclosure 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attomey 11. [C Drawing(s) (35 U.S.C. 113) [Total Sheets English Translation Document (if applicable) Information Disclosure Copies of IDS 5. Oath or Declaration [Total Pages Statement (IDS)/PTO-1449 Citations Newly executed (original or copy) ORIGINAL Copy from a prior application (37 CFR 1.63 (d)) Preliminary Amendment Return Receipt Postcard (MPEP 503) (for continuationIdivisional with Box 18 completed) (Should be specifically itemized) DELETION OF INVENTOR(S) Certified Copy of Priority Document(s) (if foreign priority is claimed) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR Nonpublication Request under 35 U.S.C. 122 16 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation of prior application No For CONTINUATION OR DIVISIONAL APPS only: The office disclosure of the prior application, from which an oath or dr. lafation is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Correspondence address below Name **Address** City State Zip Code Country Telephone Name (Print/Type) Duperon Registration No. (Attorney/Agent) Date

Burden Hour Statement: This form is estimal of to take 0.2 hours to complete Time will vary depending upon the needs of the Individual Case. Any comments on 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application. Washington, DC 20231.

OIPE 400		Data: Mai	led:	7/10/2005	
OCT 2 5 2005	f 1995, no persons are required			PTO/SB/01 (10-01) Ihrough 10/31/2002. OMB 0651-0032 J.S. DEPARTMENT OF COMMERCE contains a valid OMB control number.	
Under the Paperwork Peduction Act o	OR UTILITY OR GN PLICATION 1.63) Declaration Submitted after Initia Filing (surcharge (37 CFR 1.16 (e)) required) ereby declare that:	Attorney Docket N First Named Inven COMF Application Numbe Filing Date Art Unit Examiner Name	umber A	phowso Dupermo	
THE INSTANTANEOUS EVACUATION TUBE					
the specification of which is attached hereto OR Was filed on (MM/DD/YYYY) Application Number OR Application Number OR Application Number OR MM/DD/YYYY) Application Number OR US 10/7/8,296 (if applicable).					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits breeder's rights certificate(s), or 365 States of America, listed below and breeder's rights certificate(s), or any claimed.	under 35 U.S.C. 119(a)-(d (a) of any PCT international) or (f), or 365(b) of any fore	eign application(s) for patent, inventor's or plant	
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
2, 417, 174	Canada	30/01/2003			
Additional foreign application nu	inuers are listed on a supple	emental priority data sheet F	TO/SB/02B atta	ched hereto:	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Data: mailed 17/10/2005.

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to-respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Num or Bar Code La	nber abel	OR	Correspondence address below		
Name Alphonse Dupopron					
Address 6210 Boulevard ST-Michol #2					
City MONTréal		State Quo'h	2C ZIP HIY-DE7		
Country CaNada Te	elephone 514	-668-7943	3 Fax		
I hereby declare that all statements made herein of my are believed to be true; and further that these stateme made are punishable by fine or imprisonment, or both, validity of the application or any patent issued thereon.	own knowledge ar	e true and that all states	nents made on information and but of		
NAME OF SOLE OR FIRST INVENTOR:	A petition h	nas been filed for thi	s unsigned inventor		
Given Name (first and middle [if any]) Alpho NSQ		Family Name or Surname	uperrow		
Inventor's Signature Hanne Du	penen		Date /3/10/2005		
Residence: City Montroal	State (000)	OC Country COL	The state of the s		
Mailing Address 6210 Boule		ST- Micho	,		
City MONTE OL NAME OF SECOND INVENTOR NO. NO.	State DOO'6	OC ZIP H/U-S	EF Country Canada		
Given Name	A petition has	been filed for use u	nsigned inventor		
(first and middle [if any]) Family Name or Surname					
Inventor's Signature					
			Date		
Residence: City	State	Country	Citizenship		
Mailing Address					
City	State	715			
Additional inventors are being named on the sup	State plemental Additional	ZIP al Inventor(s) sheet(s) P	Country O/SB/02A attached bereto		



PTO/SB/01A (10-01) Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

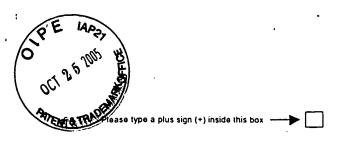
aperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention THE INSTANTANEOUS ENACUATION TUBE					
As the below named inventor(s), I/we declare that:					
This declaration is directed to:					
The attached application, or Application No. 10/7/8,296, filed on 21/11/2003					
as amended on(if applicable);					
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;					
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;					
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INVENTOR(S)					
Inventor one: Alphouse Duperrow					
Signature: Aphonse Jupanom Citizen of: Canada					
Inventor two:					
Signature: Citizen of:					
Inventor three:					
Signature: Citizen of:					
Inventor four:					
Signature: Citizen of:					
Additional inventors are being named onadditional form(s) attached hereto.					
rden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take the state of the public to file (and the USPTO					

burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date: mailed 17/10/2005



PTO/SB/02A (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it contains a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page of

				1 age 01					
Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])					Fam	nily Name	or Su	ımame	
NONE					.,				
Inventor's Signature	1							Date	
Residence: City	State				Country		c	itizenship	
Mailing Address					<u> </u>			1	
Mailing Address									
City		Sta	ite		ZIP Count		untry	ry	
Name of Additional Joint Inven	tor, if an	y:		A petition has been filed for this unsigned inventor					
Given Name (first and mid	dle [if any])			Family Name or Sumame					
	i i								
Inventor's Signature								Date '	
Residence: City	!	Sta	ate		Country			Citizenship	
Mailing Address									
Mailing Address									
		T			T				
City		Sta	ate		ZIP		oun	trv	
Name of Additional Joint Inventor, if any:			☐ A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname				Sumame		
				<u> </u>	uning		dinamo		
Inventor's Signature						Date			
Residence: City	State		Country			Citizenship			
Mailing Address									
Malling Address					T	———т			
City	State			ZIP	İ	Cou	intry		

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED—FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box -	→ 🗌
---	-----

PTO/SB/02B (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION — Supplemental Priority Data Sheet

Additional foreign app	lications:			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
2,417,174	cavada	30/01/2003		
		·		
·				
	; !			
	I			
	!			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box

PTO/SB/18 (08-00) Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number.

DESIGN PATENT APPLICATION TRANSMITTAL

Attorney Docket No. First Named Inventor

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No.

ADDRESS TO:	DESIGN V	VALUTILITY: A "design patent" protects an article's ornamental appearance				
1 Applicant Commissioner for Patents 14	in anicie i	vay an article looks) (35 U.S.C. 171), while a "utility patent" protects the way s used and works (35 U.S.C. 101). The ornamental appearance of an article				
Box Design		s its shaperconfiguration or surface ornamentation upon the article, or both. Both				
10	n and a utility patent may be obtained on an erticle if invention resides both in its intal appearance and its utility. For more information see MPEP 1502.01.					
APPLICATION ELEMENTS See MPEP chapter 1500 concerning design patent application conte	ACCOMPANYING APPLICATION PARTS					
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. Assignment Papers (cover sheet & document(s))					
2. Applicant claims small entity status.	8. 37 CFR 3.73(b) Statement Power of Attorney					
3. Specification [Total Pages [Included to the second of t	<u>/</u>]]	9 English Translation Document (if applicable)				
Preamble Cross References to Related Applications		Information Disclosure Copies of IDS				
Statement Regarding Fed sponsored R & D Description of the figure(s) of the drawings		10. Statement (IDS)/PTO-1449 Citations 11. Preliminary Amendment				
- Feature description - Claim (only one (1) claim permitted, MPEP 1503.	.03)	Return Receipt Postcard (MPEP 503)				
4. Drawing(s) (37 CFR 1.152) [Total Sheets 5] 5. Oath or Declaration [Total Pages 7]] /	(Should be specifically itemized)				
a. Newly executed (original or copy)	۱ , ۲	13. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 16 completed)		Request for Expedited Examination of a Design Application (37 CFR 1.155)				
DELETION OF INVENTOR(S)	l	(NOTE: Substitute "Box Expedited Design" for "Box Design" in the address indicated above.)				
Signed statement attached deleting inventor(s) named in the prior application, see	ľ					
37 CFR 1.63(d)(2) and 1.33(b)		15 Other:				
- Pproducti Bata Sheet. See 37 CFK 1.76						
16. If a CONTINUING APPLICATION, check appropriate box, and Application Data Sheet und	i supply th ler 37 CFR	e requisite information below and in a preliminary amendment, or in an 1.76:				
Continuation Divisional Continuation) IJe v-Qi-O	(CIP) of prior application No.: 10 718, 206				
Prior application information: Examiner HUSA 5	10Mg	SOM imm Art Units				
For CONTINUATION or DIVISIONAL APPS only. The tire disclosure under Box 5b, is considered a part of the disclosure of the accompanying						
under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
17. CORRESPONDENCE ADDRESS						
Customer Number or Bar Code Label or Correspondence address below						
Name Alphonse Duperrow						
Address						
6210. Boulevard ST-Michel #2						
City MONTreal	State	Queboc Zip Code HIV-2F7				
Country Canoda Telephone 514-668-7943 Fax						
Name (Print/Type), Alphouse Duperrol Registration No. (Attorney/Agent)						
(Allomeyragelli)						
Signature // Ohmo Supano Date /3/16/2005						

Burden Hour Statement: This torn is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Design, Washington, DC

PTO/SB/19 (10-01)
Approved for use through 10/31/2002, OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PLANT PATENT APPLICATION

Attorney Docket No. First Named Inventor

TRANSMITTAL [THE INSTANTANEOUS EVACUATION TUP			
(Only for new nonprovisional applications filed under 37 CFR 1.53(b))	Express Mail Label No.			
Assistant Commission ADDRESS TO: Box Patent Application Washington, DC 2023	on			
APPLICATION ELEMENTS See MPEP chapters 600 & 1600 concerning plant patent application conte	ACCOMPANYING APPLICATION PARTS			
1.	7. Assignment Papers (cover sheet & document(s)) 8. 37 CFR 3.73(b) Statement Power of Attorney 9. English Translation Document (if applicable) 10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 11. Preliminary Amendment 12. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. Certified Copy of Priority Document(s) (if foreign priority is claimed) 14. Request Nonpublication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Application Data Sheet. See 37 CFR 1.76.	Note: Please state the Latin name and variety denomination of the plant claimed in a separate section of the specification.			
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76. Continuation				
17. CORRESPONDENCE ADDRESS				
Customer Number or Bar Code label	or Correspondence address below			
Name Alphowse. Duporman				
Address 6210 Boule ward STal	michel H2.			
City Montton (State	Quinc Zip Code HUL 277			
COUNTRY CANADA Telephone	1000 hoc Zip Code H14-2F7			
Name (Print/Type) Alphone Dome Dome Surden House Statement: This form's estimated to take 0.2 nours to complete Time will	Registration No. (Attorney/Agent)			

the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC Washington, DC Washington, DC 20231.